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SERIAL NUMBER 09/938,063	FILING DATE 08/23/2001  RULE	CLASS 607	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. 04644-101001
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## APPLICANTS

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*verified KOM*

\*\* CONTINUING DATA \*\*\*\*\*

*none KOM*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none KOM*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/26/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MA	DRAWING 5	CLAIMS 25	CLAIMS 4
Verified and Acknowledged	<i>Kristen Muller</i> <i>icon</i> Examiner's Signature Initials				

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TITLE  
Skin-applied-electrode pads METHOD OF APPLYING DEFIBRILLATOR ELECTRODE PAD WITH

FILING FEE	FOLDED RELEASE SHEET  FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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